

**MINNESOTA WING HEADQUARTERS – CIVIL AIR PATROL
WING KEY ASSIGNMENT AGREEMENT**

Printed Name of Member Assigned Keys:

Address:

Telephone Numbers

Home:

Work:

Keys Assigned

Area to Which Key Provides Access

I request that I be issued the above keys for the performance of my duties as a member of the Minnesota Wing Staff or Group 3 staff. I will secure these keys and insure that unauthorized persons will not have access to them. I understand that these keys are the property of the United States Air Force and that it is a Federal Offense to duplicate them. I also understand that upon terminating my active affiliation with the Minnesota Wing Staff or Group 3 staff, or upon demand of the Commander, Deputy Commander or Chief of Staff of the Minnesota Wing Civil Air Patrol, I will return these keys to the Chief of Staff.

Legal Signature:

Date:

----- **TO BE FILLED OUT BELOW THIS LINE BY WING FINANCE** -----

Chief of Staff Approval: